

fatigue of its own teasing vagaries, and to induce sleep at night. Tonics—some one of the preparations of iron especially, were generally required. The citrate, tartrate or muriated tincture of iron may be used. According to Dr. G. the carbonate combined with conium, with the occasional addition of morphine answers admirably as a general tonic.

To quell the sleepless ravings of some cases a cautious use of chloroform was in a few cases found useful. From the free administration of diffusible stimulants more permanent relief was, however, derived by this class of patients. Wine, spirits, ammonia, sulphuric ether may be employed according to the special exigencies of the case.

The use of cathartics, to relieve costiveness, and of emetics to relieve the stomach from sources of irritation, will be occasionally useful.

In two or three cases—of a low, nervous, melancholy, somewhat hysterical character—with loss of appetite, inability to fix the attention on any object, Dr. G. has found great benefit from the continued use of moderate doses of quinia, with an occasional anodyne.

“In a word, the treatment of puerperal insanity,” remarks the author of the interesting paper under review, “is, to brace up the enfeebled body and shattered nerves, to procure as absolute quiet and repose for the organ of the mind, as we gain for a broken bone by the use of splints. To devise the special means by which this end may be attained constitutes the difficulty in both cases. In both, also, there is a point in their history, when passive treatment having done its work, it needs to be replaced by action of the limb or brain, as the case may be. To recognize the exact time when this time is reached, and make judiciously the change of means, should ever be objects of the greatest care. When mental exercise can be safely substituted for mental quiet—now passing into lethargy—excitement of the emotions replace indifference, then they are not only proper, but almost imperative. But, to be too hasty in this matter, is only to renew the former trouble. On the other hand, too long delay allows the patient to sink into partial fatuity.”

We cannot be accused of having occupied too large a space in our notice of the paper of Dr. Grundy. It is not always the size of a work that is the test of its value. A long didactic treatise will often fail in the communication of the same amount of positive information which is imparted by the little pamphlet before us, presenting simply the faithful analysis of the leading points presented by the history of fifty-six cases of puerperal insanity.

D. F. C.

ART. XXII.—*A Lecture.* By D. HAYES AGNEW, M.D., Surgeon to the Philadelphia Hospital, Lecturer on Anatomy, etc. etc. Published for the Class. 8vo. pp. 59. Philadelphia, 1861.

Eulogy on the late John W. Francis, M.D., LL.D., being a Discourse on His Life and Character. By VALENTINE MOTT, M.D., LL.D., etc. etc. Delivered before the New York Academy of Medicine, May 29, 1861. 8vo. pp. 33. New York, 1861.

THE subject of Dr. Agnew's lecture is a sketch of the life and professional labours of Baron Larrey, who, if not the father, was unquestionably the reformer and systematizer of military surgery. Who, as a surgeon, far outstripped all his predecessors in the extent and diversity of his professional attainments; standing prominent among his contemporaries for the soundness of his judgment in all things appertaining to his duties, whether as a simple surgeon, a surgeon-major of hospitals, a surgeon-in-chief, and, finally, inspector general of hospitals. He was equally distinguished for his devotedness to the entire detail of duties which devolved upon him in each of these positions, as for his untiring industry and ever active zeal, under all surrounding circumstances, from the very commencement of the protracted wars which sprang out of the French revolution, throughout the several campaigns, to which these gave rise; whether on the

Rhine, in Italy, in Egypt and Syria—in Boulogne, Ulm, and Austerlitz; in Saxony and Prussia, in Poland, Spain, and Russia, and the final campaign in France and the Netherlands, of 1813. Amid all of which he was constantly busy in providing for the comforts and the safety of the soldiers—the prompt relief and recovery of the sick and wounded, by the introduction of flying ambulances, the organization of hospitals wherever most needed, the establishment of lecture-ships for the especial instruction of the French military surgeons, and the careful study of the character of the diseases and accidents incident to the life of the soldier, whether in the camp or on the field—whether upon alpine heights, in the damp and cool valley, the arid desert, the wide extended marsh, or the vines and the olive and the fig trees of Southern Europe; amid tropical heats, or the deep and drifting snows and biting frosts of a Russian winter.

Amid all his other employments, Baron Larrey found time to record his observations and to give them to the world, subsequently, in the form of essays and memoirs—thus erecting, with his own hands, the most appropriate monument that could be devised, to commemorate his talents and his labours—the strongest testimonial of his claim to the station of the first and greatest among the military surgeons of all countries and all ages.

The sketch of the life and labours of Baron Larrey given by Dr. Agnew, is one of very great ability, and replete throughout with deep interest. Without being tedious in details, it is, at the same time, sufficiently minute to present to the mind of the reader a very clear portrait of that illustrious surgeon—a truly accurate idea of his career as a surgeon—his intimate association with the movements and achievements of the French army under the republic and the empire, and of the claims which he presents to our consideration and to that of posterity.

The subject of Dr. Agnew's lecture—and one which has been so ably treated by him—was aptly chosen at the present juncture, when our country, forced aside from its peaceful pursuits, has been compelled to assume the panoply of war. Than Baron Larrey, no one can be adduced whose entire career is adapted to furnish a more admirable model for the imitation of those into whose hands are intrusted the health and lives of our citizen soldiers, whether during their sojourn in camp and garrison—when encompassed about with danger amid the fight, and when, after the strife and carnage are over, they are numbered amid the wounded and the maimed.

The learned, witty, polished and earnest Nestor of the medical profession of New York, Dr. John W. Francis, who, after completing the allotted three-score and ten years of man's earthly pilgrimage, was last year gathered to his fathers, has found in his friend, colleague, and contemporary, Dr. Valentine Mott, a truthful and appreciative eulogist.

No one of those whose names are identified with the history of medicine and medical literature in the city of New York, during the present century, stand in more prominent relief than that of Dr. Francis. After a thorough professional education and the diligent improvement of opportunities afforded him by a personal intercourse with the leading physicians and surgeons of London, Edinburgh and Paris, during a visit made by him to Europe, he commenced a successful career as a medical teacher and practitioner, in his native city. Here, amid his absorbing duties as a lecturer, and the occupation of his time by the calls of an extensive circle of patients, he nevertheless found leisure for the preparation of valuable contributions to the literature of his profession, and for intercourse with the wits and literati, the savans, poets, and artists of his day.

Fond of society, of which his brilliant conversational powers, and his varied knowledge, combined with an unostentatious liberality, made him, always, a favourite centre: delighting in all that is calculated to advance and to brighten life, Dr. Francis was equally alive and ever ready to fulfil the sterner duties of life. He was prompt to lend a helping hand in the promotion of every movement for the advancement of science, or the relief of suffering humanity. He was not merely the open advocate and efficient patron of public and professional charities, but his private life was a continual round of unostentatious beneficence; his ear was always open to the cry of distress, and his hand was ever ready to

supply, in secret, the wants of poverty, and to furnish solid relief to the pangs of the suffering.

In the death of Dr. Francis we have lost another of those worthies of the olden school, "whose lives and conversation magnified the physician in the eyes of the people, while their devotedness in the hours of sickness and of danger, endeared their profession to the hearts of the entire community."

D. F. C.

ART. XXIII.—*Transactions of the Epidemiological Society of London.*
Vol. I. Part II. 8vo. pp. 127. London, 1862.

THOUGH, taken as a whole, the contents of the present portion of the printed Transactions of the Epidemiological Society may not equal in value and interest those of the portion which preceded, nevertheless, more than one of the articles embraced in it furnish important materials towards an elucidation of the etiology and laws of propagation of epidemic diseases.

From a general report upon the prevailing diseases of the years 1859, 1860, drawn up by Dr. McWilliam, the able Secretary of the society, we select one or two facts of especial interest.

In the summer of 1859 the cholera broke out at Bombay and Poonah, in the East Indies, and almost simultaneously in Europe, where, commencing at Ham-burgh, and afterwards extending to the various countries of the Baltic, and later to the coast of Holland, it rested on the Mediterranean sea-board of Spain, and carried devastation amid the Moorish and Spanish troops in Morocco. From the autumn of 1859, up to that of 1860, the cholera appears to have been wide spread and fatal in many parts of India.

Cholera appeared at the Mauritius on the 19th of September, 1859. It continued to prevail within two miles and a half of Port Louis, until the 24th of November. It appeared also in the capital, but the conditions for its propagation not being present, only from twenty to twenty-five cases occurred there. At Grand River, however, which is within the municipality of Port Louis, 149 deaths were recorded. At this place there are two important aggregations of people, in the lunatic asylum, and at Camp Benoit, a large assemblage of badly built and badly ventilated huts inhabited by Indians. The facts connected with various visitations of cholera in this district are especially characteristic of the capricious nature of the disease. In the cholera epidemic of 1854, nearly fifty per cent. of the female inhabitants of the asylum perished, while Camp Benoit, the sanitary condition of which was bad, was the only place that escaped. During the epidemic of 1856, the entire district remained free from the disease, not a single case of diarrhœa, even, having occurred in the asylum. During the epidemic of 1859, again, the entire locality, with both the asylum and Camp Benoit, suffered severely. The immunity of this district at one time, and its invasion at another, could not be accounted for, we are assured, on any change in its sanitary condition.

On the 24th of November, 1859, the cholera disappeared entirely from every part of the Island, but in three weeks subsequently it reappeared and continued to prevail to the end of February, 1860.

From the same report we derive the facts connected with the importation into Lisbon of yellow fever in December, 1859, which are particularly interesting from their bearing upon the question as to the mode of conveyance of that disease to distant places and the measures adapted to prevent such conveyance.

A sailing vessel, the "*Cidade de Belem*," arrived at Lisbon, December 31, 1859, from Para, in Brazil, after a passage of thirty-eight days. Whilst the vessel was at Para, the yellow fever prevailed there, and eight days previous to her departure two of her crew took the disease and died. During the voyage the crew remained in perfect health. Three days after the ship's arrival at Lisbon, the hatches were opened for the purpose of unloading, and the same day all hands, including a pilot and health guard officer, both of whom were sent on board at Lisbon, were attacked with nausea, and other unpleasant symptoms.